U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:
13775	3 / 2005 Through: (2 / 3) / 2005
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name ROBERT M DUNCAN	Name TERMSTERS LOCAL 728
	Labor Organization File Number
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street	Street 2540:LACE WOOD AVE SIUN
CITY DATES TO THE PROPERTY OF	City AHIANTIA
State GEORGIA ZIP Code + 4 30423	State CCCORGLA ZIP Code +4 3303/5
5. Position in labor organization.	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Name	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street Street	
City	
State ZIP Code + 4	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true; correct, and complete. (See the section on penalties in the instructions.)

Signed

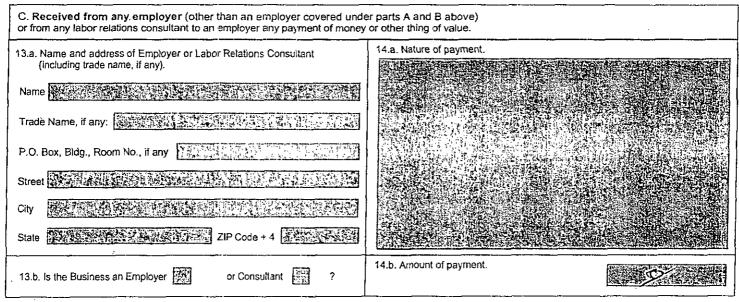
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On 2/6/0

Date

76/25/9: 6236

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Committee Total a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer 11.a. Nature of such dealing 10. If 9.b. or 9.c. is checked give trust or employer's name Trade Name, if any: P.O. Box, Bldg., Room No., if any 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received



12.b. Amount.

Χļ	Route to		Х	Reason
	Accounting Adjustments Batching and Numbering Clearing and Deposit Collection Criminal Investigation  ORDT ITPP Data Control (Balancing) Document Services Entity Control Error Resolution Examination (Audit) Files Reject Correction Returns Analysis	☐ IMF ☐ BMF ☐ NMF ☐ EPMF ☐ IRAF ☐ IRP ☐ CAWR ☐ Other file:		Missing or illegible data    EIN
	Statute Control Other activity (explain)		(	Dlease transship To Ogden S & Ther
		Ate		is in Clempt Ong. doc Department of the Treasu